

RECEIVED
CENTRAL FAX CENTER

09:49:29 a.m.

03-17-2008

1 / 17

**Fay
Sharpe** LLPProtecting Ideas Since 1884

MAR 17 2008

FAX Cover Sheet

1100 Superior Avenue, Seventh Floor
Cleveland, Ohio 44114-2579
Telephone: 216.861.5582, Fax: 216.241.1666
www.faysharpe.com

Date:	March 17, 2008	Total Pages: 17 including cover sheet
To:	U.S. Patent and Trademark Office	
Attn.:	Examiner J. CHENG; Art Unit 3768	
Fax No.:	(571) 273-8300	
From:	Thomas E. Kocovsky, Jr.	
Re:	US Patent Serial No. 09/978,599 (MAKO 2 00014 US)	

COMMENTS:

17 pp: 1 pp Fax Cover Sheet
 2 pp Amendment Transmittal Letter(s)
 14 pp Amendment F (37 CFR 1.312 Amendment)

The documents accompanying this facsimile transmission include information from the firm of Fay Sharpe LLP that might be legally privileged and/or confidential. The information is intended for the use of only the individual or entity named on this cover sheet. If you are not the intended recipient, any disclosure, copying, or distribution of these documents, or the taking of any action based on the contents of this transmission, is prohibited. If you have received this transmission in error, these documents should be returned to this firm as soon as possible, and we ask that you notify us immediately by telephone so we can arrange for their return to us without cost to you.

L:\HMM\DATA\2008\MAKO200014.US.FAX.DOC

MAR 17 2008

AMENDMENT TRANSMITTAL LETTER

Attorney Docket No. MAKO 2 00014 US

Serial No.: 09/978,599	Filing Date: October 16, 2001	Examiner: J. CHENG
Group Art Unit: 3768 Confirmation: 5128	Invention: DIGITAL MINIMALLY INVASIVE SURGERY SYSTEM	

To the Commissioner For Patents:

Transmitted herewith is an AMENDMENT F (37 CFR 1.312 AMENDMENT) in the above-identified application. The fee has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims remaining after amendment		Highest Number Previously Paid For	No. of Extra Claims Present	Rate	Additional Rate
Total Claims	36	Minus	39	-	\$ 50	\$ 0.00
Indep. Claims	12	Minus	12	-	\$210	\$ 0.00

- ☒ No additional claims fee is required.
- ☐ An additional fee of \$_____ is due for _____. Payment is authorized to be charged to a Credit Card. The applicants enclose an appropriate form PTO-2038 for this purpose.
- ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 06-0308. A duplicate copy of this sheet is enclosed.
- ☒ Applicants hereby request any additional extensions of time that may be necessary and authorize the extension of time fees to be charged to Deposit Account No. 06-0308.

Respectfully submitted,

FAY SHARPE LLP

Date:

17 March 2008

Thomas E. Kocovsky, Jr.
Thomas E. Kocovsky, Jr.
Reg. No. 28,383
1100 Superior Avenue, 7th Floor
Cleveland, Ohio 44114-2579
(216) 861-5582

CERTIFICATE OF FAXING

I hereby certify that these AMENDMENT TRANSMITTAL LETTER (x2) & AMENDMENT F (37 CFR 1.312 AMENDMENT) in connection with U.S. Patent Application Serial No. 11/199,559 are being transmitted to facsimile number (571) 273-8300 on this 17 day of March, 2008.

By: *Nancy McNulty*

MAR 17 2008

09:50:21 a.m.

03-17-2008

3/17

AMENDMENT TRANSMITTAL LETTER

Attorney Docket No. MAKO 2 00014 US

Serial No.: 09/978,599	Filing Date: October 16, 2001	Examiner: J. CHENG
Group Art Unit: 3768 Confirmation: 5128	Invention: DIGITAL MINIMALLY INVASIVE SURGERY SYSTEM	

To the Commissioner For Patents:

Transmitted herewith is an **AMENDMENT F (37 CFR 1.312 AMENDMENT)** in the above-identified application. The fee has been calculated as shown below.

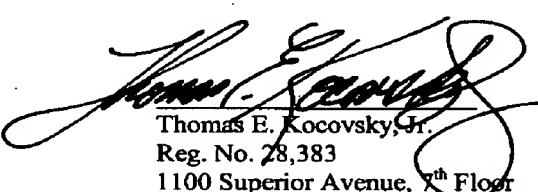
CLAIMS AS AMENDED						
	Claims remaining after amendment		Highest Number Previously Paid For	No. of Extra Claims Present	Rate	Additional Rate
Total Claims	36	Minus	39	-	\$ 50	\$ 0.00
Indep. Claims	12	Minus	12	-	\$210	\$ 0.00

- ☒ No additional claims fee is required.
- ☐ An additional fee of \$_____ is due for _____. Payment is authorized to be charged to a Credit Card. The applicants enclose an appropriate form PTO-2038 for this purpose.
- ☒ Please charge any additional fees or credit overpayment to Deposit Account No. 06-0308. A duplicate copy of this sheet is enclosed.
- ☒ Applicants hereby request any additional extensions of time that may be necessary and authorize the extension of time fees to be charged to Deposit Account No. 06-0308.

Respectfully submitted,

FAY SHARPE LLP

Date: 17 March 2008


Thomas E. Kocovsky, Jr.
Reg. No. 28,383
1100 Superior Avenue, 7th Floor
Cleveland, Ohio 44114-2579
(216) 861-5582

CERTIFICATE OF FAXING

I hereby certify that these **AMENDMENT TRANSMITTAL LETTER (x2) & AMENDMENT F (37 CFR 1.312 AMENDMENT)** in connection with U.S. Patent Application Serial No. 11/199,559 are being transmitted to facsimile number (571) 273-8300 on this 17 day of March, 2008.

By: Shirley McNulty

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

RECEIVED
CENTRAL FAX CENTER

MAR 17 2008

In re application of) Examiner: J. CHENG
R. ABOVITZ, et al.)
Serial No.: 09/978,599) Art Unit: 3768
Filed: October 16, 2001) Confirmation: 5128
For: **DIGITAL MINIMALLY**)
INVASIVE SURGERY)
SYSTEM)
Date of Notice of Allowance:)
December 17, 2007)
Attorney Docket No.:) Cleveland, OH 44114
MAKO 2 00014 US) March 17, 2008

AMENDMENT F
(37 CFR 1.312 AMENDMENT)

Commissioner For Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This amendment is responsive to the Notice of Allowance of December 17, 2007.

Amendments to the claims are reflected in the listing of claims which begins on page 2.

Remarks begin on page 14.

Certificate of Faxing

I certify that **AMENDMENT F (37 CFR 1.312 AMENDMENT)** in connection with Ser. No. **09/978,599** is being

☒ transmitted to facsimile number **571/273-8300 (571-273-2885)** under 37 C.F.R. § 1.8 on the date indicated below.

<p>Date</p> <p>March 17, 2008</p>	<p>Signature</p> <p><i>Hilary M. McNulty</i></p> <p>Printed Name</p> <p>Hilary M. McNULTY</p>
-----------------------------------	---

LAHMM\DATA\2008\MAKO200014.US.AMN.DOC